ARC 2004 HSI Guide On-Site Document List

Team Chief Documents

General Documents

Official biographies of the wing and medical unit commander

Medical unit mission/vision/goals

Strategic plan and measurement tools used to assess goal achievement

Unit's organizational chart

Unit Manning Document/Unit Personnel Manning Roster (UMD/UPMR)

Executive Management Committee (EMC) minutes for past 2 years

One copy of all medical unit instructions, directives and policies (including index)

Last 6 months of squadron newsletters (if applicable)

Any documents that describe professional conduct and performance requirements for all staff. In addition, provide copies of the required semiannual briefings for AFMS values, expectations, and standards of expected behavior

Benchmark Program submissions, if applicable

Suicide and Violence Awareness Education

Copy of metrics required by HHQ (percent of personnel trained)

Copy of lesson plans used for training

Nurse Inspector Documents

Nursing Services Operational Responsibilities/Basic Life Support (BLS)

Nursing practice policies and guidance

Competency assessment folders/6-part folders for all nurses

Verification of nurses' licenses and civilian employment – may be in 6-part folders

Nursing practice staff meeting minutes (if any)

NREMT training program statistics (percent current, month by month, for last 12 months)/tracking tools

BLS currency statistics (percent current, month by month, for last 12 months)/tracking tools

Letter of appointment of BLS trainer/coordinator

Immunizations

List of personnel trained as primary, immunization backup (IBT), and augmentee (IA) immunization technicians

Documentation of initial and ongoing training

Section OIs and other guidance related to immunization procedures, esp. mobility support

Wing currency statistics (percent of personnel currently immunized) on hep A, tetanus, influenza, TB

TB read return rates for last 12 months

Customer Satisfaction/Patient Sensitivity

Any documents relative to customer complaints, resolution, tracking, etc.

Customer comment card data (if applicable)

Laboratory

DoD CLIP certification (does not need to be brought to IG work center; can be viewed in lab)

Laboratory services policies and guidance

Medication Management

Copy of unit formulary/medication list

P & T Committee minutes

Infection Control Program

Infection control annual plan

Bloodborne pathogen and TB exposure control plans

Documentation of completed surveillance activities

Infection Control Committee minutes

Lesson plans and rosters for initial and annual infection control training; percent trained

3-5 PHS 731s, International Certificates of Vaccination (if applicable), or 2766 C and the medical records of personnel who had positive IPPD skin test reactions

Sharps Injury log and all documentation related to bloodborne pathogen exposure incident

Demand Reduction Program

Cross Functional Committee meeting minutes

Documentation of untestable rate for last 12 months

Metrics demonstrating percent of wing drug tested (percent of GSU tested if applicable)

Documentation of JAG legal review

List of trusted agents across the wing

DRPM, DTPAM and MRO appointment letters

Food Safety and Sanitation

PH food service sanitation evaluations for the last 24 months; include facility trend analysis

Lesson plan for training receipt inspection personnel

ALFOODACT and customer complaint logs

Food vulnerability assessment

Foodborne Illness Investigation Plan

Sanitation Inspection Review				
Facility Name				
All phases of operation				
inspected				
Management's self-				
inspection program				
evaluated				
Food safety training				
effectiveness evaluated				
Inspector consistency	_			_
Ratings match findings	-			

"+" = PRESENT

"-" = NOT PRESENT "NA" = NOT APPLICABLE

Medical Service Corps Inspector Documents

Logistics

Professional services contract documents (if applicable) (with QAE training documentation when applicable)

WRM Stock Status Report(s) from host active duty unit (if applicable)

Logistics memorandum(s) of agreement/understanding with host active duty and/or detached units (if applicable)

Self-Inspection Program

Unit self-inspection program directive

Program manager's book/binder

Documentation of self-inspections and follow-up actions

Open discrepancies status reports to executive management committee (12 months)

Dental

Class 3 and 4 rosters

Dental readiness classification percentages (past 12 months)

Copy of last two annual inventories of dental records

Dental Service Manager's file (contents outlined in Chapter 1 of AFI 47-101)

All Class 3 dental records and others as requested by the inspector (flyer and nonflyer)

Documentation of orientation and ongoing training

Credentials (Note: Keep PCFs until requested by inspector)

All PCFs will be required for review and inspector will arrange a time for delivery

Documentation since last HSI relating to all adverse privileging actions (if applicable)

Documentation since last HSI relating to abeyance actions which did not otherwise result in adverse action (if applicable)

Documentation since last HSI relating to any medical incident investigations (if applicable)

Documentation since last HSI relating to any investigation/inquiry into the misconduct, professional competence, negligence, or health condition of a privileged provider (if applicable)

Support Agreements

Training Affiliation Agreement(s)

Host/Tenant Support Agreement

All other memorandums of understanding/agreement (if applicable)

Quantitative Fit Testing (QNFT) Program

Percentage of personnel requiring ONFT

Description of procedures to identify and schedule personnel for QNFT

Bioenvironmental Engineering Readiness

Documentation of joint BE/Civil Engineering readiness training

Documentation of operational testing of chemical agent monitors owned by the medical unit

(Units with a disaster response requirement only) BEE checklists developed for accidents and contingencies (e.g., chemical spills, fuel spills and incidents involving advanced composites, natural disasters, biological or chemical terrorism)

(Units with a disaster response requirement only) List of BEE disaster response equipment

Water vulnerability assessment

Appointment letters

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MIO	UL	IJUΥ

Base Deployment Plan

Summaries of recall exercises conducted with dates (24 months)

Unit recall roster

Listing of primary mobility personnel

Records of annual mobility briefings/exercises

15 mobility folders (primary mobility personnel)

Self-Aid and Buddy Care program documentation (provide completed SABC worksheet below)

SABC DATA COLLECTION WORKSHEET

Unit Name:		Date: PROGRAM INFORMATION
Units (list all wing and tenant units for which SABC Advisor has program responsibility)	Latest two dates unit program was evaluated	Unit instructor(s)
I certify the above inform	nation is true and accur	rate.
	Self-A	Aid/Buddy Care Advisor or Designee

Medical Manager Inspector Documents

Aerospace Medicine Management

One year of Aeromedical Council (AMC) meeting minutes and wing/group monthly flying safety meeting minutes (if safety minutes are unavailable, provide copies of aeromedical briefings which were presented at those meetings)

Flight surgeon non-clinical activity logs for past 6 months

Office OIs, policy memos, other written guidance

FSO training activities and schedules for the past and upcoming year

Documentation of FS briefings to professional staff, flyers (e.g., Flight Safety), and any other base or community briefings

1041 log (past 12 months)

DNIF management metrics (if applicable)

Waiver card file and database summary sheet and a list of your MAJCOM delegated waiver authority (flying and nonflying waivers)

Unit's 4T tracking roster and AF form 422 suspense file

Six months of the Assignment Availability Code 31, 37, and 81 roster (AFRC)

Six months of Assignment Limitation C Code and Deployment Availability Code rosters (ANG)

Six 4-T profiles (3 pregnancy and 3 other) with the outpatient medical records

MEB tracking log (past 12 months)

Three medical records of members processed for WWD/MEB evaluation

Reserve Component Periodic Health Assessment/Individual Medical Readiness

Measures relating to inspected areas; e.g., exam currency, Individual Medical Readiness (PIMR) rate; mammography & Pap smear tracking logs/currency statistics

Medical records for the following:

- 2 Flying waiver packages, 1 local waiver approval and 1 MAJCOM/AFMOA approval
- 1 Initial (I, IA, II, III) Flying/Spec. Ops. Duty

RCPHA records

- 10 Non-flyers:
 - -- 5 that required PHAM/HCP visit
 - -- 5 that did not require PHAM/HCP visit
- 10 Flyers

Miscellaneous medical records (can count towards the total fly/non-fly records requested):

- 3 flyers currently using contact lenses while flying
 - -- 2 executive physical records (e.g., wing commander, any general officer, etc.; at least 1 active aviator)
- 3 female member's records
- 3 records from people over 40 years old

Optometry

OIs/written guidance related to normal clinic operations and aviator support lens program and mobility support (e.g., gas mask inserts)

Aircrew Soft Contact Lens Program log and directives

Deployment/Redployment Processing Support

Deployment tracking/follow-up log for last 12 months; must include pre-/post-deployment actions

- Medical records of 5 personnel who have deployed and redeployed in the last 12 months; pick records of personnel deployed to areas with some preventive medicine risk (such as SWA, Africa, Central America)

Occupational Health

Occupational Health Working Group minutes for the last 12 months with attachments

Occupational Health Medical Examination (OHME) currency rates (e.g., ASIMS printout) for each of the previous 12 months (include all types of exams)

All AF Forms 2766 and AF Forms 2755 (or equivalent) for all special purpose exams

Medical records and copies of AF Forms 2766 and 2755 for personnel assigned to the following shops:

- 2 from structural maintenance or similar shop
- 2 from corrosion control or allied trades
- 2 from pesticide shop

<u>Note</u>: Include AF Forms 2755 and 2766 that were in effect at the time the last occupational examination was performed.

AFOSH Council minutes for the last 12 months, with attachments

Bioenvironmental Engineering

List all industrial workplaces, identifying the routine surveillance category (according to AFI 48-145) and the dates of the two most recent surveys

Listing of identified priority "A" special surveillance requirements, to include date the priority was assigned (see AFI 48-145 Table 2-2)

Documentation of BE certification of personal protective equipment (ref AFOSH Std 91-31, para 2.10.1) for at least 4 workplaces (preferably category 1 shops)

Base respiratory protection instruction

List of workplaces where respirator use is authorized; include contaminants of concern, respirator type, and cartridge type, if applicable

Base radiation safety instruction (or other formal documentation of the base radiation safety program). A listing of shops receiving ALARA training and training documentation for at least one of those shops

List of locations where abnormal/adverse exposure to ionizing radiation has occurred in the past 3 years. Include reports of investigation or abnormal/overexposures

List of BE-related findings from external audits/inspections (e.g., ECAMP, OSHA, NRC). Indicate what has been done to correct each finding

Industrial case files for three shops. These should be Category I "worst case" workplaces. Include AF Forms 2755 and 2766 (or equivalent) for those shops

Fetal Protection Program

Fetal protection case tracking mechanisms/log for the last 12 months and all related instructions Copies of BE input for five pregnancy profile evaluations (preferably from industrial areas)

Hearing Conservation Program

Abnormal audiogram findings log (e.g., STS/PTS log) for the last 12 months

Medical records of 5 patients who demonstrated a permanent threshold shift and have completed the Hearing Conservation Diagnostic Center (HCDC) referral process

Radiology

Patient log

Report from last BMET inspection

Documentation of orientation and ongoing training

OIs, policies and guidance

Enlisted Inspector Documents

On The Job Training Program

Military personnel flight generated training roster (last 3 months)

BTM staff assistance visit assessment (most current)

- UTM assessment (most current)

UTM informal work center visits (work center visit schedule plus most current reports)

Unit training meeting agenda/minutes (previous 4 quarters)

Monthly commander briefing tool (last 6 months)

Listing of trainers/certifiers (most current)

Master Training Plans (all)

Separate enlisted 6-part training folders as follows:

1st group - folders of personnel in TSC B & F

2nd group - folders of personnel in TSC C & G 3rd group - all other folders

Health Records Management

Local policies and procedures for management of health records

Inventory of health records (most current) and follow-up documentation (if applicable)

Data and methodology used to validate a minimum 95 percent availability and accountability of health records (last 12 months)

Annual Training Plan

UTA training plan (current year)

Annual tour training plans, group and incremental tours (current year plus 2 previous years)

Annual tour (group and incremental) after action reports (any completed for current year plus 2 previous years)

AFSC Specific Sustainment Training

Gap analysis/training needs assessment (most current)

AFSC specific sustainment training (RSVP) continuity folder (or equivalent) for all assigned **AFSCs**

Listing of functional training managers appointed as OPRs for each AFSC (most current)

RSVP training requirements documentation (WBITS or WARMEDS database) for all assigned **AFSCs**

Readiness Reporting (ART/MRDSS/SORTS)

Unit DOC statement (original)

Designation letter of who can act in absence of commander (SORTS)

Appointment letters (ART OPR and SORTS monitor)

Worksheets or data and methodology for monthly update to MRDSS (WBITS) (current month)

Access to commander UTC assessments for current ART report

Access to current SORTS report plus supporting information (worksheets, easy read, etc.)

Medical Readiness Planning and Oversight

MRO appointment letter

Medical Readiness Planning Course certificate(s) (MRO, MRNCO) (not applicable to ANG)

MURT

Medical readiness training summary reports (or access to WBITS) (last 4 quarters)

Medical readiness annual training plan and exercise schedule (current year/cycle)

Medical readiness training lesson plans for Core and SORTS reportable requirements and sign-in rosters (current cycle)

Local policies and procedures for implementing make-up dates for missed training

Copies of any MAJCOM waivers granting equivalent readiness training (current cycle)

Local procedures for oversight of personnel assigned to the SME/GSU (as applicable)

Completed medical readiness data collection sheet (attached)

Base Support Plans

Base support plan(s) (disaster response and contingency plans)

Host active duty MCRP (only applicable to co-located AFRC units)

Disaster team training binders (only applicable to units tasked under a base support plan/MCRP for specific medical response)

Exercise Requirements, Development and Evaluation

Mass casualty exercise planning documentation (development of training objectives, operational plan, scenario development, EET evaluation criteria, etc.) (current year plus previous year)

Post-exercise or incident summaries (current year, if complete, or 2 previous years)

Training with WRM Assemblages

WRM assemblage training plans (current cycle plus previous cycle) (only applicable to units possessing DOC assigned WRM equipment UTCs)

AIR RESERVE COMPONENT MEDICAL READINESS DATA COLLECTION WORKSHEET

Unit:		_	Date	
	UNIT	INFOI	RMATION	
UTCs:			GSU Medical Personnel	
(attach copy of DOC statement)	N/A	N/A	Authorized/Assigned	
Medical Personnel			SME Medical Personnel	
Authorized/Assigned			Authorized/Assigned	

SORTS MEASURABLE TRAINING

SORTS reportable training requirements are listed below – individuals must maintain currency in all required training elements to be considered trained and counted for the SORTS report. Frequency/requirements defined in AFI 41-106, para 5.4 and Atch 3.

TRAINING REQUIREMENT	CURRENT # pers asgn to deployable positions	CURRENT # pers current/ percent trained	6 MONTHS AGO	1 YEAR AGO
Medical effects of Nuclear, Biological				
and Chemical Warfare * **				
UTC-specific team training				
(refer to 41-106 for personnel assigned				
to CCATT UTCs)				
Field Sanitation and Hygiene				
Wound Care and Casualty Mgt/SABC *				
NBCDT				
NBCD TQT				
Disease Prevention				

^{*} SORTS requirements for AFRC generation units (UTC FFDAE)

^{**} Training requirement for personnel holding clinical AFSCs (Atch 8). SABC required for non-clinical AFSCs.

CORE TRAINING REQUIREMENTS

Core training required for all medical service personnel. Frequency/requirements defined in AFI 41-106, para 5.1 and Atch 3.

TRAINING REQUIREMENT	CURRENT # pers asgn less than 6- months	CURRENT # pers current/ percent trained	6 MONTHS AGO	1 YEAR AGO
AFMS Mission/Doctrine Briefing				
Wound Care and Casualty Mgt/SABC *	see below	X	X	X
Combat Stress Control				
Medical effects of Nuclear, Biological				
and Chemical Warfare * **	see below	X	X	X
Geneva Convention/LOAC				
Unit Mission Briefing				
Casualty Movement				
AFSC-Specific Sustainment (RSVP)				

^{*} SORTS reportable training requirements - show training statistics under SORTS measurable table

DEPLOYMENT TRAINING REQUIREMENTS

Deployment training requirements are listed below. Required of all personnel assigned to a deployable UTC position. Currency maintained IAW Atch 3.

TRAINING REQUIREMENT	CURRENT # pers asgn to deployable positions	CURRENT # pers current/ percent trained	6 MONTHS AGO	1 YEAR AGO
Combat Arms				
NBCDT *	see below	X	X	X
NBCD TQT *	see below	X	X	X
UTC-specific team training (refer to 41-106 for personnel assigned to CCATT UTCs) *	see below	X	X	X
Deployment Processing				
Explosive Ordinance (EOR)				

^{*} SORTS reportable training requirement - show training statistics under SORTS measurable table

^{**} Training requirement for personnel holding clinical AFSCs (Atch 8)

ANNUAL TOURS

Show both total number and percent of participants

CURRENT YEAR

Group Annual Tour Location(s)	Dates	# and % of Participants (other than home station)	# and % of Participants (at home station)	After Action Reports (Yes / No)
	_	_		
Incremental Tours*	X			
	X			

1 YEAR AGO

Group Annual Tour Location(s)	Dates	# and % of Participants (other than home station)	# and % of Participants (at home station)	After Action Reports (Yes / No)
Incremental Tours*	X			
	X			

2 YEARS AGO

Group Annual Tour Location(s)	Dates	# and % of Participants (other than home station)	# and % of Participants (at home station)	After Action Reports (Yes / No)
Incremental Tours*	X			
	X			

^{*} Incremental tours defined as one/two/three (or so) individuals deployed to a training platform separate from unit group tours.

UNIT DISASTER AND UTC TEAM TRAINING

TEAM	Date of Most Recent Training ex: mass casualty exercise	Number Personnel Assigned	Number Personnel Trained	Number of Training Sessions in Past 2 Years
		(mark "N/A" if not ap	plicable)	
Medical Control Center			Î	
Field Treatment Team				
(SME)				
Clinical Treatment				
Teams (Minimal,				
Delayed, Immediate)				
Radiology				
Laboratory				
Pharmacy				
Surgery				
Nursing Services				
Mental Health/Crisis				
Response Team				
Public Health				
Bioenvironmental				
Engineering				
Medical Logistics				
Manpower				
Patient Administration	TIMO III	/ 11		
	UTC Te	ams (use as applicable	e) 	
Patient Retrieval				
Decontamination				
CCAT				
Other UTC (Specify)				
Other UTC (Specify)				
Other UTC (Specify)				
Other UTC (Specify)				
Other UTC (Specify)				
Other UTC (Specify)				
Other UTC (Specify)				
Other UTC (Specify)				

EXERCISE SUMMARY

Complete only for those exercises required/completed by your organization. Mark "N/A" if training requirement does not apply to your organization.

NAME OF EXERCISE REQUIREMENT	DATES CONDUCTED	DATES CONDUCTED
	THIS YEAR (or CYCLE)	LAST YEAR (or CYCLE)
Mass casualty exercise (annual)		
Disaster response		
(annual – only applicable if tasked under a base		
support plan for medical response)		
Mobilization exercise (annual for all personnel		
assigned to mobility positions)		
Recall (IAW local requirements)		
Field exercise/training for deployable personnel as		
defined by MAJCOM/SG (every 4 th cycle)		
Assemblage setup, inventory and exercise		
(AEF cycle - all personnel assigned to deploy with		
applicable WRM assemblage, i.e. ATC) *		
Each UTC tasked to deploy with WRM assets		
(i.e. EMEDS, CCAT, etc.) – train to extent		
possible if assets are not DOC assigned UTCs		

^{*} For use only by those organizations tasked with DOC statement assigned WRM equipment UTCs

I certify the above information is true and accurate.

Medical Readiness Officer or Designee